

OVERSEAS TRAVEL CLEARANCE REQUEST

MUST BE SUBMITTED 30 DAYS IN ADVANCE OF TRAVEL

A. PERSONAL DATA:

NAME: _____ RANK/GRADE: _____

SSN: _____ CLEARANCE: _____

DEPT: _____ DUTY TITLE: _____

PASSPORT #: _____ DATE ISSUED: _____ DATE EXPIRES: _____

DOB: _____ POB: _____ STUDENT BOX #: _____

B. VISIT SPECIFICATIONS:

CITY & COUNTRY/BASE TO BE VISITED: _____

PURPOSE OF VISIT: _____

DATE(S) OF VISIT: _____ ALTERNATE DATE(S): _____

ORGANIZATION & KEY PERSONNEL TO BE VISITED (INCLUDE NAME, TITLE, DEPT., ADDRESS, TELEPHONE # AND OTHER PERTINENT INFORMATION): ****very important****

PROPOSED ITINERARY: (IF MORE ROOM IS NEEDED, USE REMARKS SECTION OR ATTACH A COPY OF YOUR ITINERARY):

DATE: _____ DEP: _____ /TIME: _____

VIA: _____ /FLT #: _____

DATE: _____ ARR: _____ /TIME: _____

DATE: _____ DEP: _____ /TIME: _____

VIA: _____ /FLT #: _____

DATE: _____ ARR: _____ /TIME: _____

(CONTINUED ON REVERSE SIDE)

NATURE OF INVITATION? (ATCH, LTRS, ETC):_____

CLASSIFIED INFORMATION TO BE DISCUSSED/DISCLOSED?:_____

FOREIGN OFFICIALS/ AMERICAN EMBASSY PERSONNEL VISITED?:_____

C. GENERAL:

1. LOGISTICAL/ADMINISTRATIVE SUPPORT:_____

2. REMARKS:_____

3. USUHS POC (INCLUDE PHONE #):_____

(TRAVELER'S SIGNATURE & DATE)